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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/193,770 07/10/2002 PAT 6,678,905
 which is a CON of 09/760,195 01/12/2001 PAT 6,519,798
 and is a CIP of 09/680,259 10/05/2000 PAT 6,557,198

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/26/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 6	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		

ADDRESS

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TITLE

Mattress and bed assembly providing an enlarged sleeping surface area

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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